PAGE 1 / 35

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X	For Other Tha	an An Authorize	d Committee		Office U	Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRIN		ample: If typing, ter the lines.	type 1	2FE4M5	
SURGICAL CAR	E AFFILIATES P	OLITICAL ACT	ION COMMI	TTEE		
ADDRESS (number and some second secon	SUITE 901 BIRMINGHAN	OOD VILLAGE			AL 3520	09
2. FEC IDENTIFICAT	ION NUMBER ▼	CITY ▲		STA	ATE 🛦	ZIP CODE ▲
C C00440743		3. IS THIS REPORT	x NEW	OR	AMENDED (A))
4. TYPE OF REPORATION (Choose One) (a) Quarterly Report April 15 Quarterly R July 15 Quarterly R October 15 Quarterly R January 31 Year-End R July 31 Mid Report (Nor Year Only) Termination (TER)	eport (Q1) eport (Q2) eport (Q3) eport (YE) -Year n-election (MY) Report (C) 12-I PRE Rep (d) 30-I POS Rep	E-Election ort for the:	Jun Jul 2 Primary (12P) Convention (12C	08 / Y	Aug 20 (M8) Sep 20 (M9) Oct 20 (M10) General (12G) Special (12S) Runoff (30R)	(Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only)
5. Covering Period	10 01	2016	through	10 /	19 20	016
I certify that I have exan Type or Print Name of T	Sharff, Richar	the best of my knod, L., , Jr.	wledge and belie	ef it is true, o	correct and compl	ete.
Signature of Treasurer	Sharff, Richard, L., , Jr.		[Electronically File	<i>ed]</i> Date		7 2016
NOTE: Submission of false	e, erroneous, or incomple	ete information may s	ubject the person	signing this F	Report to the penal	ties of 52 U.S.C. § 30109
Office Use						C FORM 3X Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2016		69047.16
	(b) Cash on Hand at Beginning of Reporting Period	86000.71	
	(c) Total Receipts (from Line 19)	4904.90	56080.71
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	90905.61	125127.87
7 .	Total Disbursements (from Line 31)	2500.00	36722.26
3.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	88405.61	88405.61
).	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
0.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE

R	eport Covering the Period: From:		10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
11.	Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees						
	(i) Itemized (use Schedule A)	4190.20	36854.80				
	(ii) Unitemized	714.70	19171.35				
	(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	4904.90	56026.15				
	(b) Political Party Committees	0.00	0.00				
	(c) Other Political Committees (such as PACs)(d) Total Contributions (add Lines	0.00	0.00				
10	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) Transfers From Affiliated/Other	4904.90	56026.15				
12.	Party Committees	0.00	0.00				
13.	All Loans Received	0.00	0.00				
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00				
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made to Federal Candidates and Other	0.00	0.00				
17	Political Committees Other Federal Receipts	0.00	0.00				
	(Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds	0.00	54.56				
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00				
	(b) Levin Funds (from Schedule H5)	0.00	0.00				
	(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00				
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	4904.90	56080.71				
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	4904.90	56080.71				

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	1000 1110 1 01100	Galeridai Teal-to-Date
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating		
Expenditures	0.00	122.26
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	0.00	122.26
2. Transfers to Affiliated/Other Party	7 7 7	
Committees	0.00	0.00
Federal Candidates/Committees and Other Political Committees	2500.00	29000.00
Independent Expenditures	4 4	
(use Schedule E)5. Coordinated Party Expenditures	0.00	0.00
(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00
	4 4	4 4 4
S. Loan Repayments Made	0.00	0.00
7. Loans Made	0.00	0.00
B. Refunds of Contributions To: (a) Individuals/Persons Other	4 4	
Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
(1111 -	0.00	0.00
Other Disbursements (Including		
Non-Federal Donations)	0.00	7600.00
. Federal Election Activity (52 U.S.C. § 30101(20	0))	
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
·	3.55	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
. Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	2500.00	36722.26
	2500.00	30722.20
. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	2500.00	26702.00
	2300.00	36722.26

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 05/2016)

of Disbursements

1 LO 1 01111 3X (11ev. 03/2010)		r age 3
III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	4904.90	56026.15
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4904.90	56026.15
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	122.26
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	122.26

FOR LINE NUMBER:					PAGE	=	6	OF	35	
(check only one)										
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	ng the name and address of any political committee					
NAME OF COMMITTEE (In Full) SURGICAL CARE AFFILIA	TES POLITICAL ACTION COMMIT	ГЕЕ				
Full Name of Individual (Last, First, Midd	lle Initial) or Full Organization Name	Date of Receipt				
Mailing Address 569 Brookwood Village Suite 901		10 19 2016				
City	State Zip Code	Transaction ID : SA11AI.6157				
Birmingham	AL 35209	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	80.00				
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
Surgical Care Affiliates	Vice President	Payroll deduction \$40.00 biweekly				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	840.00					
Full Name of Individual (Last, First, Midd Barsamian-Armstrong, Judith, E		Date of Receipt				
Mailing Address 569 Brookwood Village		10 19 2016				
Suite 901 City	State Zip Code					
Birmingham	AL 35209	Transaction ID : SA11AI.6022 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	20.00				
Name of Employer (for Individual) Surgical Care Affiliates	Occupation (for Individual) Administrator	Memo Item Payroll deduction \$10.00 biweekly				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00					
Full Name of Individual (Last, First, Midd). Belcher, Jacquelin, , ,	lle Initial) or Full Organization Name	Date of Receipt				
Mailing Address 569 Brookwood Village Suite 901		10 19 2016				
City Birmingham	State Zip Code AL 35209	Transaction ID : SA11AI.6024				
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period				
Name of Employer (for Individual) Surgical Care Affiliates	Occupation (for Individual) Administrator	Memo Item Payroll deduction \$19.00 biweekly				
Receipt For:	Aggregate Year-to-Date ▼	_				
Primary General Other (specify)	361.00					
SUBTOTAL of Receipts This Page (option	al)	119.00				
TOTAL This Period (last page this line nur	mber only)	1 1 40 1 1 40 1 1 40 1				

FOR LINE NUMBER:					PAGE	7	OF	35	
(check only one)									
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	the name and address of any political committee	
NAME OF COMMITTEE (In Full) SURGICAL CARE AFFILIAT	ES POLITICAL ACTION COMMITT	TEE
Full Name of Individual (Last, First, Middle Betancourt, Leah, H., , Mailing Address 569 Brookwood Village Suite 901 City Birmingham FEC ID number of contributing	State Zip Code AL 35209	Date of Receipt 10 19 2016 Transaction ID: SA11Al.6027 Amount of Each Receipt this Period
federal political committee. Name of Employer (for Individual) Surgical Care Affiliates Receipt For: Primary General Other (specify) ▼	Occupation (for Individual) Director, Managed Care Aggregate Year-to-Date ▼ 210.00	Memo Item Payroll deduction \$10.00 biweekly
Full Name of Individual (Last, First, Middle B. Bloebaum, Jennifer, , , Mailing Address 569 Brookwood Village Suite 901 City Birmingham FEC ID number of contributing federal political committee. Name of Employer (for Individual) Surgical Care Affiliates Receipt For: Primary General Other (specify)	State Zip Code AL 35209 C Occupation (for Individual) Administrator Aggregate Year-to-Date 210.00	Date of Receipt 10 19 2016 Transaction ID: SA11Al.6028 Amount of Each Receipt this Period 20.00 Memo Item Payroll deduction \$10.00 biweekly
Full Name of Individual (Last, First, Middle Brust, Mary Beth, , , Mailing Address 569 Brookwood Village Suite 901 City Birmingham FEC ID number of contributing federal political committee. Name of Employer (for Individual) Surgical Care Affiliates Receipt For: Primary General Other (specify)	State Zip Code AL 35209 C Occupation (for Individual) Vice President Aggregate Year-to-Date 400.00	Date of Receipt 10 19 2016 Transaction ID: SA11AI.6029 Amount of Each Receipt this Period 20.00 Memo Item Payroll deduction \$20.00 biweekly
SUBTOTAL of Receipts This Page (optional	ber only)	60.00

FOR LINE NUMBER:					PAGE		8	OF	35	
(check only one)										
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or for commercial purposes, other than using	g the name and address of any political committee					
NAME OF COMMITTEE (In Full) SURGICAL CARE AFFILIAT	ES POLITICAL ACTION COMMIT	ГЕЕ				
Full Name of Individual (Last, First, Middle Bunch, Sandra, K., ,	e Initial) or Full Organization Name	Date of Receipt				
Mailing Address 569 Brookwood Village Suite 901		10 19 2016				
City	State Zip Code AL 35209	Transaction ID : SA11AI.6030				
Birmingham	AL 35209	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	20.00				
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
Surgical Care Affiliates	Administrator	Payroll deduction \$10.00 biweekly				
Receipt For:	Aggregate Year-to-Date ▼					
Primary ☐ General Other (specify) ▼	210.00					
Full Name of Individual (Last, First, Middle Burns, Vicki, , ,	e Initial) or Full Organization Name	Date of Receipt				
Mailing Address 569 Brookwood Village Suite 901		10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City	State Zip Code	Transaction ID : SA11AI.6032				
Birmingham	AL 35209	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	38.00				
Name of Employer (for Individual) Surgical Care Affiliates	Occupation (for Individual) Administrator	Memo Item Payroll deduction \$19.00 biweekly				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 399.00					
Full Name of Individual (Last, First, Middle Chokski, Ajay, , ,	e Initial) or Full Organization Name	Date of Receipt				
Mailing Address 569 Brookwood Village Suite 901		10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City	State Zip Code AL 35209	Transaction ID : SA11AI.6036				
Birmingham	VF 3350A	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	100.00				
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
Surgical Care Affiliates	Group Vice President	Payroll deduction \$50.00 biweekly				
Receipt For: Primary General	Aggregate Year-to-Date ▼					
Other (specify)	1050.00					
SUBTOTAL of Receipts This Page (optional	1)	158.00				
TOTAL This Period (last page this line num	iber only)					

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(check only one)										
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	for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) SURGICAL CARE AFFILIATES	POLITIC	CAL ACTION COMMITT	EE
Α.	Full Name of Individual (Last, First, Middle Initial Chye, Eleanor, , ,	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 569 Brookwood Village Suite 901			10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID : SA11AI.6037
	Birmingham	AL	35209	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		120.00
	Name of Employer (for Individual)	Оссі	upation (for Individual)	Memo Item
	Surgical Care Affiliates	Vice	President	Payroll deduction \$60.00 biweekly
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	Aggregate	Teal-to-Date ▼	
	Other (specify) ▼	L	1260.00	
В.	Full Name of Individual (Last, First, Middle Initia Colbert, Joseph, E., ,	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 569 Brookwood Village Suite 901			10 19 2016
	City	State	Zip Code	Transaction ID : SA11AI.6038
	Birmingham	AL	35209	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		40.00
	Name of Employer (for Individual) Surgical Care Affiliates		upation (for Individual) ninistrator	Memo Item Payroll deduction \$20.00 biweekly
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 420.00	
С .	Full Name of Individual (Last, First, Middle Initia Collins, Kelli, , ,	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 569 Brookwood Village Suite 901			10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID : SA11AI.6039
	Birmingham	AL	35209	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		38.00
	Name of Employer (for Individual) Surgical Care Affiliates		upation (for Individual) President	Memo Item Payroll deduction \$19.00 biweekly
	Receipt For:			
	Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		399.00	
Н	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number of		<u> </u>	198.00

			 MBER	:	PAGE		10	OF	35
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	for commercial purposes, other than using the				
	NAME OF COMMITTEE (In Full) SURGICAL CARE AFFILIATES	POLIT	ГІСА	L ACTION COMMIT	ΓΕΕ
Α.	Full Name of Individual (Last, First, Middle Initial Courtay, Rena, , ,	al) or Ful	ll Orga	anization Name	Date of Receipt
	Mailing Address 569 Brookwood Village Suite 901				10 19 2016
	City	State		Zip Code	Transaction ID : SA11AI.6041
	Birmingham	AL		35209	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			50.00
	Name of Employer (for Individual)	C	Occupa	ation (for Individual)	Memo Item
	Surgical Care Affiliates	\	VP, Op	perations	Payroll deduction \$25.00 biweekly
	Receipt For:	Aggrega	ata Va	ar-to-Date ▼	
	Primary General	Aggrega	ale le	ai-io-Date +	
	Other (specify) ▼	L.	-	525.00	
В.	Full Name of Individual (Last, First, Middle Initia Crump, Carol, , ,	al) or Ful	ll Orga	anization Name	Date of Receipt
	Mailing Address 569 Brookwood Village Suite 901				10 19 2016
	City	State		Zip Code	Transaction ID : SA11AI.6043
	Birmingham	AL		35209	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	_		40.00
	Name of Employer (for Individual) Surgical Care Affiliates	I .		ation (for Individual) perations	Memo Item Payroll deduction \$20.00 biweekly
	Receipt For: Primary General Other (specify) ▼	Aggrega	ate Ye	ar-to-Date ▼ 420.00	
<u>с</u> .	Full Name of Individual (Last, First, Middle Initial Davis, Elizabeth, A., ,	al) or Ful	ll Orga	anization Name	Date of Receipt
	Mailing Address 569 Brookwood Village Suite 901				10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State		Zip Code	Transaction ID : SA11AI.6045
	Birmingham	AL		35209	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			20.00
	Name of Employer (for Individual) Surgical Care Affiliates		Occupa Adminis	ation (for Individual)	Memo Item Payroll deduction \$10.00 biweekly
	Receipt For:	I .			- ayron addadair wro.oo biwoonly
	Primary General	Aggrega	ate Ye	ar-to-Date ▼	
	Other (specify)		-	210.00	
H	CUBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number of			<u> </u>	110.00

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(check only one)									
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	ly information copied from such Reports and Sta for commercial purposes, other than using the i				
	NAME OF COMMITTEE (In Full) SURGICAL CARE AFFILIATES	POLI ⁻	TICA	L ACTION COMMITT	EE
Α.	Full Name of Individual (Last, First, Middle Initial Donnelly, Alison, , ,	al) or Fu	ıll Orga	nization Name	Date of Receipt
	Mailing Address 569 Brookwood Village Suite 901				10 19 2016
	City	State		Zip Code	Transaction ID : SA11AI.6046
	Birmingham	AL		35209	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			50.00
	Name of Employer (for Individual)	(Occupa	tion (for Individual)	Memo Item
	Surgical Care Affiliates		Directo	r, External Communications	Payroll deduction \$25.00 biweekly
	Receipt For:	Aggreg	ate Yea	ar-to-Date ▼	1
	Primary General	1.55.15			
	Other (specify) ▼	<u></u>		275.00	
В.	Full Name of Individual (Last, First, Middle Initia Doroni, Debra, , ,	al) or Fu	ıll Orga	nization Name	Date of Receipt
	Mailing Address 569 Brookwood Village Suite 901				10 19 2016
	City	State		Zip Code	Transaction ID : SA11AI.6047
	Birmingham	AL		35209	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			20.00
	Name of Employer (for Individual) Surgical Care Affiliates			tion (for Individual) al Vice President	Memo Item Payroll deduction \$10.00 biweekly
	Receipt For: Primary General	Aggreg	ate Yea	ar-to-Date ▼	
	Other (specify) ▼	Ŀ	-	210.00	
<u> </u>	Full Name of Individual (Last, First, Middle Initial Dragolovic, Goran, , ,	al) or Fu	ıll Orga	nization Name	Date of Receipt
	Mailing Address 2012 E. Glenoaks Blvd				10 19 2016
	City	State		Zip Code	Transaction ID : SA11AI.6048
	Glendale	CA		91206	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			190.00
	Name of Employer (for Individual) Surgical Care Affiliates	I .	Occupa SVP	tion (for Individual)	Memo Item Payroll deduction \$95.00 biweekly
	Receipt For:	Aggreg	ate Ye	ar-to-Date ▼	1
	Primary General	7.99.09	100		
	Other (specify)	L		1995.00	
s	UBTOTAL of Receipts This Page (optional)			····	260.00
_	OTAL This Period (last page this line number of	nly)			

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(check only one)										
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		13		14		15		16		17

or for commercial purposes, other than using	the name and address of any political committee	
NAME OF COMMITTEE (In Full) SURGICAL CARE AFFILIAT	ES POLITICAL ACTION COMMIT	ТЕЕ
Full Name of Individual (Last, First, Middle Dugan, Ann, L., ,	e Initial) or Full Organization Name	Date of Receipt
Mailing Address 569 Brookwood Village Suite 901		10 19 2016
City	State Zip Code AL 35209	Transaction ID : SA11AI.6049
Birmingham	AL 35209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Surgical Care Affiliates	Administrator	Payroll deduction \$25.00 biweekly
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	525.00	
Full Name of Individual (Last, First, Middle Edler, Marie, , ,	lnitial) or Full Organization Name	Date of Receipt
Mailing Address 569 Brookwood Village Suite 901		10 19 2016
City	State Zip Code	Transaction ID : SA11AI.6050
Birmingham	AL 35209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.00
Name of Employer (for Individual) Surgical Care Affiliates	Occupation (for Individual) SDR	Memo Item Payroll deduction \$30.00 biweekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 535.00	
Full Name of Individual (Last, First, Middle	Initial) or Full Organization Name	Date of Receipt
Mailing Address 569 Brookwood Village Suite 901		10 19 2016
City	State Zip Code	Transaction ID : SA11AI.6052
Birmingham	AL 35209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	154.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Surgical Care Affiliates	Vice President	Payroll deduction \$77.00 biweekly
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	1617.00	
SUBTOTAL of Receipts This Page (optional))	264.00
TOTAL This Period (last page this line numb	per only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)									
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		13		14		15	16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

Full Name of Individual (Last, First, Midd Elliott, Kevin, R., , Mailing Address 569 Brookwood Village	le Initial) or Full Organization Name	Date of Receipt				
Suite 901	I -	10 19 2016				
City	State Zip Code	Transaction ID : SA11AI.6055				
Birmingham	AL 35209	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	30.00				
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
Surgical Care Affiliates	Senior Director, Financial	Payroll deduction \$15.00 biweekly				
Receipt For:	Aggregate Year-to-Date ▼	7				
Primary General Other (specify) ▼	315.00					
Full Name of Individual (Last, First, Midd Ellison, Christian, D., ,	le Initial) or Full Organization Name	Date of Receipt				
Mailing Address 569 Brookwood Village		10 19 2016				
Suite 901 City	State Zip Code	- 				
Birmingham	AL 35209	Transaction ID : SA11AI.6056 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	230.00				
Name of Employer (for Individual) Surgical Care Affiliates	Occupation (for Individual) Director	Memo Item Payroll deduction \$115.00 biweekly				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2415.00					
Full Name of Individual (Last, First, Midd, Erb, Ronald, E., ,	le Initial) or Full Organization Name	Date of Receipt				
Mailing Address 569 Brookwood Village Suite 901	10th	10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City Birmingham	State Zip Code AL 35209	Transaction ID : SA11AI.6057				
FEC ID number of contributing federal political committee.	C 3220	Amount of Each Receipt this Period 20.00				
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
Surgical Care Affiliates	Administrator	Payroll deduction \$10.00 biweekly				
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 210.00					

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	and Statements may not be sold or used by any persing the name and address of any political committee to					
NAME OF COMMITTEE (IN Full) SURGICAL CARE AFFILIA	TES POLITICAL ACTION COMMITT	EE				
Full Name of Individual (Last, First, Mid Evely, Jim, , , Mailing Address 569 Brookwood Village	, ,	Date of Receipt				
Suite 901	Chata Zin Cada	10 19 2016				
City Birmingham	State Zip Code AL 35209	Transaction ID : SA11AI.6058				
	AL 35209	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	20.00				
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
Surgical Care Affiliates	Administrator	Payroll deduction \$10.00 biweekly				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	210.00					
Full Name of Individual (Last, First, Mid Fees, Nicholas, , ,	dle Initial) or Full Organization Name	Date of Receipt				
Mailing Address 569 Brookwood Village Suite 901		10 19 2016				
City	State Zip Code	Transaction ID : SA11AI.6059				
Birmingham	AL 35209	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	40.00				
Name of Employer (for Individual) Surgical Care Affiliates	Occupation (for Individual) Assistant Controller	Memo Item Payroll deduction \$20.00 biweekly				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00					
Full Name of Individual (Last, First, Mid	dle Initial) or Full Organization Name	Date of Receipt				
Mailing Address 569 Brookwood Village Suite 901 City	State Zip Code	10 19 2016 Transaction ID : SA11Al.6060				
Birmingham	AL 35209	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	38.00				
Name of Employer (for Individual) Surgical Care Affiliates	Occupation (for Individual) Director, Managed Care	Memo Item Payroll deduction \$19.00 biweekly				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify)	342.00					
SUBTOTAL of Receipts This Page (option	nal)	98.00				
TOTAL This Period (last page this line nu	ımber only)					

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	Statements may not be sold or used by any per e name and address of any political committee t	
NAME OF COMMITTEE (In Full) SURGICAL CARE AFFILIATES	S POLITICAL ACTION COMMITT	EE
Full Name of Individual (Last, First, Middle In Frazier, Brandon, T., ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 569 Brookwood Village Suite 901		10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.6061
Birmingham	AL 35209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Surgical Care Affiliates	VP, Development	Payroll deduction \$25.00 biweekly
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	525.00	
Full Name of Individual (Last, First, Middle Ir Gallagher, Charles, O., ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 569 Brookwood Village Suite 901		10 19 2016
City	State Zip Code	Transaction ID : SA11AI.6062
Birmingham	AL 35209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer (for Individual) Surgical Care Affiliates	Occupation (for Individual) Administrator	Memo Item Payroll deduction \$10.00 biweekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
Full Name of Individual (Last, First, Middle Ir Gamez, Mary, A., ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 569 Brookwood Village Suite 901		10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.6063
Birmingham	AL 35209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer (for Individual) Surgical Care Affiliates	Occupation (for Individual) Business Office Manager	Memo Item Payroll deduction \$10.00 biweekly
Receipt For:		† , , , , , , , , , , , , , , , , , , ,
Primary General	Aggregate Year-to-Date ▼	
Other (specify)	210.00	
SUBTOTAL of Receipts This Page (optional)		90.00
TOTAL This Period (last page this line number	only)	

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	ing the name and address of any political committee	
NAME OF COMMITTEE (In Full) SURGICAL CARE AFFILIA	TES POLITICAL ACTION COMMIT	ГЕЕ
Full Name of Individual (Last, First, Mid Garcia, Gabriel, M., ,	dle Initial) or Full Organization Name	Date of Receipt
Mailing Address 569 Brookwood Village Suite 901		10 19 2016
City	State Zip Code	Transaction ID : SA11AI.6064
Birmingham	AL 35209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Surgical Care Affiliates	Director	Payroll deduction \$10.00 biweekly
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	210.00	
Full Name of Individual (Last, First, Mid George, Margaret, , ,	dle Initial) or Full Organization Name	Date of Receipt
Mailing Address 569 Brookwood Village Suite 901		10 19 2016
City	State Zip Code	Transaction ID : SA11AI.6065
Birmingham	AL 35209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer (for Individual) Surgical Care Affiliates	Occupation (for Individual) Vice President	Memo Item Payroll deduction \$20.00 biweekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	
Full Name of Individual (Last, First, Mid. Golkow, Amanda, K., ,	dle Initial) or Full Organization Name	Date of Receipt
Mailing Address 569 Brookwood Village Suite 901		10 19 2016
City Birmingham	State Zip Code AL 35209	Transaction ID : SA11AI.6066
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 20.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Surgical Care Affiliates Receipt For:	Director, New Business	Payroll deduction \$10.00 biweekly
Primary General Other (specify)	Aggregate Year-to-Date ▼ 210.00	
SUBTOTAL of Receipts This Page (option	nal)▶	80.00
TOTAL This Period (last page this line nu	umber only)	

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	NAME OF COMMITTEE (In Full) SURGICAL CARE AFFILIATES	POLIT	ICA	L ACTION COMMITT	EE
Α.	Full Name of Individual (Last, First, Middle Initial Graham, Jennifer, , ,	al) or Full	l Orga	nization Name	Date of Receipt
	Mailing Address 569 Brookwood Village Suite 901				10 19 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State		Zip Code	Transaction ID : SA11AI.6067
	Birmingham	AL		35209	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			30.00
	Name of Employer (for Individual)	Od	ccupa	tion (for Individual)	Memo Item
	Surgical Care Affiliates	Ad	dminis	strator	Payroll deduction \$15.00 biweekly
	Receipt For:	Aggregat	ite Ve	ar-to-Date ▼	
	Primary General	riggrogat		ar to Bato .	
	Other (specify) ▼	L.,	<u> </u>	315.00	
В.	Full Name of Individual (Last, First, Middle Initia Grantham, David, L., ,	al) or Full	l Orga	nization Name	Date of Receipt
	Mailing Address 569 Brookwood Village Suite 901				10 19 2016
	City	State		Zip Code	Transaction ID : SA11AI.6068
	Birmingham	AL		35209	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			30.00
	Name of Employer (for Individual) Surgical Care Affiliates		ccupa dmini	tion (for Individual) strator	Memo Item Payroll deduction \$15.00 biweekly
	Receipt For: Primary General Other (specify) ▼	Aggregat	ate Yea	ar-to-Date ▼ 315.00	
С .	Full Name of Individual (Last, First, Middle Initial Hamers, Kevin, M., ,	al) or Full	l Orga	nization Name	Date of Receipt
	Mailing Address 569 Brookwood Village Suite 901				10 19 2016
	City	State		Zip Code	Transaction ID : SA11AI.6069
	Birmingham	AL		35209	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			24.00
	Name of Employer (for Individual) Surgical Care Affiliates		ccupa dminis	tion (for Individual)	Memo Item Payroll deduction \$12.00 biweekly
	Receipt For:				1 , ,
	Primary General	Aggregat	ate yea	ar-to-Date ▼	
	Other (specify)			252.00	
Н	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number of			<u> </u>	84.00

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	or commercial purposes, other than using the r				
	NAME OF COMMITTEE (In Full) SURGICAL CARE AFFILIATES I	POLIT	TCAL	_ ACTION COMMITT	EE
Α	Full Name of Individual (Last, First, Middle Initia Hayek, Andrew, P., , Mailing Address 569 Brookwood Village	al) or Ful	l Orgar	nization Name	Date of Receipt
-	Suite 901	State		Zin Codo	10 19 2016
	City Birmingham	AL		Zip Code 35209	Transaction ID : SA11Al.6073 Amount of Each Receipt this Period
F	FEC ID number of contributing ederal political committee.	С			384.60
	Name of Employer (for Individual)			ion (for Individual)	Memo Item
_	Surgical Care Affiliates Receipt For:			recutive Officer	Payroll deduction \$192.30 biweekly
r	Primary General Other (specify) ▼	Aggrega	ate Yea	r-to-Date ▼ 4038.50	
В	Full Name of Individual (Last, First, Middle Initia Hayes, Jeffrey, W., ,	al) or Ful	l Orgar	nization Name	Date of Receipt
Ν	Mailing Address 569 Brookwood Village Suite 901				10 19 2016
C	Dity	State		Zip Code	Transaction ID : SA11AI.6074
_[Birmingham	AL		35209	Amount of Each Receipt this Period
	FEC ID number of contributing ederal political committee.	С			20.00
S	Name of Employer (for Individual) Surgical Care Affiliates		Occupat Adminis	ion (for Individual) trator	Memo Item Payroll deduction \$10.00 biweekly
F	Receipt For: Primary General Other (specify) ▼	Aggrega	ate Yea	r-to-Date ▼ 210.00	
	Full Name of Individual (Last, First, Middle Initial Hess, Cory, , ,	al) or Ful	l Orgar	nization Name	Date of Receipt
N	Mailing Address 569 Brookwood Village Suite 901				10 19 2016
	City Birmingham	State AL		Zip Code 35209	Transaction ID : SA11AI.6075 Amount of Each Receipt this Period
	FEC ID number of contributing ederal political committee.	С			50.00
	Name of Employer (for Individual) Surgical Care Affiliates		Occupat Regiona	ion (for Individual)	Memo Item Payroll deduction \$25.00 biweekly
	Receipt For:			r-to-Date ▼	
	Primary General Other (specify)	7.55.55	- 10.	350.00	
	BTOTAL of Receipts This Page (optional)			<u> </u>	454.60

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	and Statements may not be sold or used by any pers g the name and address of any political committee to	
NAME OF COMMITTEE (In Full) SURGICAL CARE AFFILIAT	TES POLITICAL ACTION COMMITTI	EE
Full Name of Individual (Last, First, Middle Ho, Huong, , , Mailing Address 569 Brookwood Village	le Initial) or Full Organization Name	Date of Receipt
Suite 901 City	State Zip Code	المنتنبا لنبا لنبا
Birmingham	AL 35209	Transaction ID : SA11AI.6076
	712 33209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Surgical Care Affiliates	Director	Payroll deduction \$20.00 biweekly
Receipt For:		
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	
55. (Spoon)/ •	7 7	
Full Name of Individual (Last, First, Middlands, Jenny, , ,	le Initial) or Full Organization Name	Date of Receipt
Mailing Address 569 Brookwood Village		M = M / D = D / Y = Y = Y
Suite 901	State Zin Code	10 19 2016
City	State Zip Code	Transaction ID : SA11AI.6079
Birmingham	AL 35209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer (for Individual) Surgical Care Affiliates	Occupation (for Individual) Administrator	Memo Item Payroll deduction \$10.00 biweekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
Full Name of Individual (Last, First, Middle). Jimenez, Geronimo, , ,	le Initial) or Full Organization Name	Date of Receipt
Mailing Address 569 Brookwood Village Suite 901		10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.6080
Birmingham	AL 35209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer (for Individual) Surgical Care Affiliates	Occupation (for Individual) Administrator	Memo Item Payroll deduction \$15.00 biweekly
Receipt For:	Aggregate Year-to-Date ▼	·
Primary General Other (specify)	210.00	
SUBTOTAL of Receipts This Page (optional	al)	90.00
TOTAL This Period (last page this line num	nber only)	

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	NAME OF COMMITTEE (In Full) SURGICAL CARE AFFILIATES	POLITI	CAL ACTION COMMITTI	EE
Α.	Full Name of Individual (Last, First, Middle Initial Klassen, Christopher, , ,	al) or Full	Organization Name	Date of Receipt
	Mailing Address 569 Brookwood Village Suite 901			10 19 2016
	City	State	Zip Code	Transaction ID : SA11AI.6083
	FEC ID number of contributing	C	35209	Amount of Each Receipt this Period 40.00
	federal political committee.	<u> </u>		7 7 7
	Name of Employer (for Individual) Surgical Care Affiliates		cupation (for Individual)	Memo Item Payroll deduction \$20.00 biweekly
	Receipt For:			a yroll deddction \$20.00 biweekly
	Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼		420.00	
В.	Full Name of Individual (Last, First, Middle Initial Konieczny, Brian, , ,	al) or Full	Organization Name	Date of Receipt
	Mailing Address 569 Brookwood Village Suite 901			10 19 2016
	City	State	Zip Code	Transaction ID : SA11AI.6085
	Birmingham	AL	35209	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		20.00
	Name of Employer (for Individual) Surgical Care Affiliates		cupation (for Individual) Iministrator	Memo Item Payroll deduction \$10.00 biweekly
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		210.00	
<u> </u>	Full Name of Individual (Last, First, Middle Initial Lally, Thomas, J., ,	al) or Full	Organization Name	Date of Receipt
	Mailing Address 569 Brookwood Village Suite 901			10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID : SA11AI.6086
	Birmingham	AL	35209	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		40.00
	Name of Employer (for Individual)	Oc	cupation (for Individual)	Memo Item
	Surgical Care Affiliates	Re	gional Vice President	Payroll deduction \$20.00 biweekly
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify)		420.00	
H	SUBTOTAL of Receipts This Page (optional)		-	100.00

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NAME OF COMMITTEE (In Full) SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Langston, Mark, , Maling Address 569 Brookwood Village Suite 901 City State 301 City State 301 City State 301 City Capacity Code and State 3600 FEC ID number of contributing federal political committies. C State Political Care Affiliates VP, Development Receipt For: Primary General City State 3200 FEC ID number of contributing state 3200 FULL State 3200 City State 3200 Annount of Each Receipt inis Period FEC ID number of contributing state 3200 City State 3200 Annount of Each Receipt inis Period FEC ID number of contributing state 3200 Annount of Each Receipt inis Period FEC ID number of contributing state 3200 Annount of Each Receipt inis Period FEC ID number of contributing state 3200 Annount of Each Receipt inis Period FEC ID number of contributing state 3200 Annount of Each Receipt inis Period FEC ID number of contributing state 3200 Annount of Each Receipt inis Period FEC ID number of contributing state 3200 Annount of Each Receipt inis Period FEC ID number of contributing state 3200 Annou		d Statements may not be sold or used by any pers the name and address of any political committee to	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Langston, Mark,		-0 POLITICAL ACTION CONT.	
AL Langston, Mark, Mailing Address 568 Brockwood Village Suite 901 City State Zip Code Birmingham AL 35209 Name of Employer (for Individual) Surgical Care Affisiates Fec ID number of contributing federal political committee. Committee Suite 901 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Linder, William, T., Mailing Address 568 Brockwood Village Suite 901 City State Zip Code Birmingham AL 35209 Full Dumber of contributing federal political committee. Coccupation (for Individual) VP. Development Faceipt For: Primary General City State Zip Code Birmingham AL 35209 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Surgical Care Affiliates Receipt For: Primary General Coccupation (for Individual) VP. Operations Primary General Coccupation (for Individual) VP. Operations Primary General City State Zip Code Individual (Last, First, Middle Initial) or Full Organization Name Loeffler, Debbie, Mailing Address 569 Brockwood Village Suite 901 City State Zip Code Individual (Last, First, Middle Initial) or Full Organization Name Loeffler, Debbie, Mailing Address 569 Brockwood Village Suite 901 City State Zip Code Individual (Last, First, Middle Initial) or Full Organization Name Loeffler, Debbie, Mailing Address 569 Brockwood Village Suite 901 City State Zip Code Individual (Last, First, Middle Initial) or Full Organization Name Loeffler, Debbie, Mailing Address 569 Brockwood Village Suite 901 City State Zip Code Aggregate Year-to-Date ▼ Individual (Last, First, Middle Initial) or Full Organization Name Loeffler, Debbie, Mailing Address 569 Brockwood Village Suite 901 City State Zip Code Individual (Last, First, Middle Initial) or Full Organization Name Loeffler, Debbie, Mailing Address 569 Brockwood Village Suite 901 City State Zip Code Individual (Last, First, Middle Initial) or Full Organization Name Loeffler, Debbie, Mailing Address 569 Brockwood Village Suite 901 Individual (Last, First,	/ SURGICAL CARE AFFILIATE	S POLITICAL ACTION COMMITT	EE
Suite 901 City Birmingham SItate AL S2p Code AL S35209 FEC ID number of contributing federal political committee. Name of Employer (for Individual) Surgical Care Affiliates Fermany General Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Suite 901 City Birmingham AL S35209 FEC ID number of contributing federal political committee. Name of Employer (for Individual) Surgical Care Affiliates VP, Development Aggregate Year-to-Date ▼ 100 101 19 Transaction ID: SA11AL6087 Footward (For Individual) Memo Item Payroll deduction \$25.00 biweekly Date of Receipt Transaction ID: SA11AL6089 Amount of Each Receipt this Period Date of Receipt this Period Transaction ID: SA11AL6089 Amount of Each Receipt this Period Date of Receipt this Period Transaction ID: SA11AL6089 Amount of Each Receipt this Period Date of Receipt this Period Transaction ID: SA11AL6089 Amount of Each Receipt this Period Date of Receipt this Period Transaction ID: SA11AL6089 Amount of Each Receipt this Period Date of Receipt this Period Transaction ID: SA11AL6089 Amount of Each Receipt this Period Date of Receipt this Period Transaction ID: SA11AL6089 Amount of Each Receipt this Period Date of Receipt this Period Transaction ID: SA11AL6089 Amount of Each Receipt this Period Date of Receipt this Period Date of Receipt this Period Date of Receipt this Period Amount of Each Receipt th		Initial) or Full Organization Name	Date of Receipt
City State Suringham State Zip Code AL Sz09 State Zip Code AL Sz09 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Linder, William, T., Mailing Address 569 Brookwood Village Suite 901 City Primary General Other (specify) State Zip Code AL Sz09 Full Name of Individual) Surgical Care Affiliates Name of Employer (for Individual) Surgical Care Affiliates Suite 901 City State Zip Code Affiliates Name of Employer (for Individual) Surgical Care Affiliates Suite 901 City State Zip Code AL Sz000 Aggregate Year-to-Date Primary General Other (specify) Memo Item Payroll deduction \$50.00 biweekly Full Name of Individual (Last, First, Middle Initial) or Full Organization Name City State Zip Code AL Sz000 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name City State Zip Code AL Sz000 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name City Simmigham AL Sz000 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name City Simmigham AL Sz000 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name City Simmigham AL Sz000 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Administrator Name Adm	<u> </u>		
Birmingham AL 35209 FEC ID number of contributing tederal political committee. Name of Employer (for Individual) Surgical Care Affiliates VP, Development Receipt For: Primary General City State Zip Code Birmingham AL 35209 Full Name of Individual (Last, First, Middel Initial) or Full Organization Name Linder, William, T. , Malling Address 569 Brookwood Village Suite 901 City Birmingham AL 35209 FEC ID number of contributing tederal political committee. Name of Employer (for Individual) Surgical Care Affiliates VP, Operations Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 100.00 Memo Item Payroll deduction \$25.00 biweekly Date of Receipt Tor Transaction ID: \$A11AL6093 Amount of Each Receipt tins Period Transaction ID: \$A11AL6093 Amount of Each Receipt tins Period Date of Receipt Tor Pormary General Other (specify) ▼ Full Name of Individual (Last, First, Middel Initial) or Full Organization Name Loeffler, Debbie, , , Malling Address 569 Brookwood Village Suite 901 City Birmingham AL 35209 FEC ID number of contributing tederal political committee. City Birmingham AL 35209 FEC ID number of contributing Ederal political committee. City Birmingham AL 35209 FEC ID number of contributing Ederal political committee. City Primary General Administrator Receipt For: Primary General Administrator Payroll deduction \$10.00 biweekly Administrator Payroll deduction \$10.00 biweekly Administrator Payroll deduction \$10.00 biweekly Amount of Each Receipt this Period Amount of Each Receipt this Period Amount of Each Receipt tins Period Amount of Each Receipt tor Payroll deduction \$10.00 biweekly Administrator Payroll deduction \$10.00 biweekly		State Zin Code	المنتنبا لنبا لنبا
FEC ID number of contributing federal political committee. Name of Employer (for Individual) Surgical Care Affiliates Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Linder, William, T., Mailing Address 569 Brookwood Village Surgical Care Affiliates Receipt For: Primary General Other (specify) State Zip Code Al. 35209 Aggregate Year-to-Date Transaction ID: SA11AL6889 Amount of Each Receipt this Period Aggregate Year-to-Date Transaction ID: SA11AL6889 Amount of Each Receipt this Period Aggregate Year-to-Date Other (specify) Other (specify) Aggregate Year-to-Date Other (specify) Aggregate Year-to-Date Other (specify) Aggregate Year-to-Date Other (specify) Administrator Other (specify) Occupation (for Individual) Apgregate Year-to-Date Other (specify) Other			
Name of Employer (for Individual) Name of Employer (for Individual) Surgical Care Affiliates Receipt For: Other (specify) ▼ Aggregate Year-to-Date ▼			Amount of Each neceipt this Period
Surgical Care Affiliates VP, Development Receipt For:		[C]	
Receipt For: Primary General Other (specify) ▼ Size S	Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Primary General Other (specify) ▼		VP, Development	Payroll deduction \$25.00 biweekly
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name 3. Linder, William, T, Mailing Address 569 Brookwood Village Suite 901 City State Zip Code Birmingham AL 35209 FEC ID number of contributing federal political committee. Name of Employer (for Individual) Surgical Care Affiliates VP, Operations Receipt For: Primary General Other (specify) ▼ Mailing Address 569 Brookwood Village Suite 901 FUII Name of Individual (Last, First, Middle Initial) or Full Organization Name Loeffler, Debbie, , , Mailing Address 569 Brookwood Village Suite 901 FEC ID number of contributing federal political committee. C Date of Receipt this Period Transaction ID : SA11AL6089 Amount of Each Receipt this Period Payroll deduction \$50.00 biweekly Date of Receipt Transaction ID : SA11AL6089 Amount of Each Receipt this Period Date of Receipt Transaction ID : SA11AL6089 Amount of Each Receipt this Period Date of Receipt Transaction ID : SA11AL6089 Amount of Each Receipt this Period Date of Receipt Transaction ID : SA11AL6089 Amount of Each Receipt this Period Date of Receipt Transaction ID : SA11AL6089 Amount of Each Receipt this Period Date of Receipt Transaction ID : SA11AL6089 Amount of Each Receipt this Period Date of Receipt Transaction ID : SA11AL6089 Amount of Each Receipt this Period Date of Receipt Transaction ID : SA11AL6089 Amount of Each Receipt this Period Date of Receipt Transaction ID : SA11AL6089 Amount of Each Receipt this Period Date of Receipt Transaction ID : SA11AL6089 Amount of Each Receipt this Period Date of Receipt Transaction ID : SA11AL6089 Amount of Each Receipt this Period Date of Receipt Transaction ID : SA11AL6089 Amount of Each Receipt this Period Date of Receipt Transaction ID : SA11AL6089 Transaction ID : SA11AL6089 Amount of Each Receipt this Period Date of Receipt this Period Transaction ID : SA11AL6089 T		Aggregate Year-to-Date ▼	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Suinder, William, T., Mailing Address 569 Brookwood Village Suite 901 City Birmingham AL 35209 Name of Employer (for Individual) Surgical Care Affiliates Primary General Other (specify) ▼ Mailing Address 569 Brookwood Village Surgical Care Affiliates Surgical Care Affiliates Surgical Care Affiliates Surgical Care Affiliates Suite 901 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name City Birmingham AL 35209 Date of Receipt Transaction ID: SA11AL6089 Amount of Each Receipt this Period Payroll deduction \$50.00 biweekly Date of Receipt Date of Receipt Memo Item Payroll deduction \$50.00 biweekly Date of Receipt Transaction ID: SA11AL6090 Amount of Each Receipt this Period EC 10 number of contributing (ederal political committee. C 20.00 Memo Item Payroll deduction ID: SA11AL6090 Amount of Each Receipt this Period FEC ID number of contributing (ederal political committee. C 20.00 Memo Item Payroll deduction ID: SA11AL6090 Amount of Each Receipt this Period FEC ID number of contributing (ederal political committee. C 20.00 Memo Item Payroll deduction ID: SA11AL6090 Amount of Each Receipt this Period FEC ID number of contributing (ederal political committee. C 20.00 Memo Item Payroll deduction ID: SA11AL6090 Amount of Each Receipt this Period FEC ID number of contributing (ederal political committee. C 20.00 Memo Item Payroll deduction ID: SA11AL6090 Amount of Each Receipt This Period FEC ID number of contributing (ederal political committee. C 20.00 Memo Item Payroll deduction ID: SA11AL6090 Amount of Each Receipt This Period		505.00	
Alling Address 569 Brookwood Village Suite 901 City Birmingham AL 35209 Receipt For: Primary Other (specify) Mailing Address 569 Brookwood Village Surgical Care Affiliates FEC ID number of contributing Individual (Last, First, Middle Initial) or Full Organization Name CLOeffler, Debbie, , , Mailing Address 569 Brookwood Village Suite 901 City Birmingham All 35209 Anount of Each Receipt this Period Payroll deduction \$50.00 biweekly Date of Receipt Transaction ID: SA11AL6089 Amount of Each Receipt this Period Payroll deduction \$50.00 biweekly Date of Receipt Transaction ID: SA11AL6090 Amount of Each Receipt this Period Payroll deduction \$50.00 biweekly Date of Receipt Transaction ID: SA11AL6090 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer (for Individual) Surgical Care Affiliates Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ Payroll deduction \$10.00 biweekly Aggregate Year-to-Date ▼ Payroll deduction \$10.00 biweekly	Utner (specify) ▼		
Suite 901 City Birmingham FEC ID number of contributing federal political committee. Name of Employer (for Individual) Surgical Care Affiliates Receipt For: Primary General Other (specify) ▼ All 35209 FUII Name of Individual (Last, First, Middle Initial) or FuII Organization Name Loeffler, Debbie, , , Mailing Address 569 Brookwood Village Suite 901 FEC ID number of contributing federal political committee. Name of Employer (for Individual) State Zip Code Birmingham All 35209 FEC ID number of contributing federal political committee. Name of Employer (for Individual) Surgical Care Affiliates Receipt For: Primary General Occupation (for Individual) Administrator Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ Payroll deduction \$50.00 biweekly Date of Receipt Transaction ID : SA11Al.6090 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer (for Individual) Surgical Care Affiliates Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ Payroll deduction \$10.00 biweekly		Initial) or Full Organization Name	Date of Receipt
State Birmingham State Zip Code 35209	-		
Birmingham AL 35209 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer (for Individual) Surgical Care Affiliates Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Loeffler, Debbie, , , Mailing Address 569 Brookwood Village Suite 901 FEC ID number of contributing federal political committee. Name of Employer (for Individual) Surgical Care Affiliates Receipt For: Aggregate Year-to-Date ▼ Transaction ID: SA1141.6090 Amount of Each Receipt this Period Transaction ID: SA1141.6090 Amount of Each Receipt this Period Date of Receipt Transaction ID: SA1141.6090 Amount of Each Receipt this Period Administrator Administrator Payroll deduction \$10.00 biweekly Payroll deduction \$10.00 biweekly		State Zip Code	
Name of Employer (for Individual) Surgical Care Affiliates Name of Employer (for Individual) Surgical Care Affiliates Name of Employer (for Individual) Name of Employer (for Individual) Name of Employer (for Individual) Other (specify) ▼	Birmingham	AL 35209	
Surgical Care Affiliates Payroll deduction \$50.00 biweekly	•	C	100.00
Receipt For: Primary General Other (specify) ▼		, , ,	
Primary General Other (specify) ▼ 1050.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Loeffler, Debbie, , , Mailing Address 569 Brookwood Village Suite 901 City State Zip Code AL Zip Code Administrator Name of Employer (for Individual) Occupation (for Individual) Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) SubstotAL of Receipts This Page (optional)			Payroli deduction \$50.00 biweekly
Tull Name of Individual (Last, First, Middle Initial) or Full Organization Name Loeffler, Debbie, , , Mailing Address 569 Brookwood Village Suite 901 City Birmingham FEC ID number of contributing federal political committee. Name of Employer (for Individual) Surgical Care Affiliates Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ Substot Al Size Zip Code Transaction ID : SA11AI.6090 Amount of Each Receipt this Period Memo Item Payroll deduction \$10.00 biweekly 170.00 Substot Al Size Zip Code Transaction ID : SA11AI.6090 Amount of Each Receipt this Period Aggregate Year-to-Date ▼ 170.00		Aggregate Year-to-Date ▼	
Date of Receipt Date of Receipt Date of Receipt		1050.00	
Mailing Address 569 Brookwood Village Suite 901 City Birmingham FEC ID number of contributing federal political committee. Name of Employer (for Individual) Surgical Care Affiliates Receipt For: Primary Other (specify) SUBTOTAL of Receipts This Page (optional). Sitate Zip Code 35209 Amount of Each Receipt this Period Transaction ID: SA11Al.6090 Amount of Each Receipt this Period Payroll deduction \$10.00 biweekly		Initial) or Full Organization Name	Date of Receipt
Suite 901 City Birmingham FEC ID number of contributing federal political committee. Name of Employer (for Individual) Surgical Care Affiliates Receipt For: Primary General Other (specify) Substote Zip Code AL 35209 Amount of Each Receipt this Period Amount of Each Receipt this Period Memo Item Payroll deduction \$10.00 biweekly			†
Birmingham AL 35209 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer (for Individual) Surgical Care Affiliates Receipt For: Primary General Other (specify) Aggregate Year-to-Date SUBTOTAL of Receipts This Page (optional) Amount of Each Receipt this Period 20.00 Memo Item Payroll deduction \$10.00 biweekly	Suite 901		
FEC ID number of contributing federal political committee. Name of Employer (for Individual) Surgical Care Affiliates Receipt For: Primary General Other (specify) SUBTOTAL of Receipts This Page (optional) Almount of Each Receipt this Period 20.00 Memo Item Payroll deduction \$10.00 biweekly	-		
Name of Employer (for Individual) Occupation (for Individual) Administrator Primary General Other (specify) General Other (specify) Other	Birmingham	AL 35209	Amount of Each Receipt this Period
Surgical Care Affiliates Receipt For: Primary Other (specify) Aggregate Year-to-Date ▼ SUBTOTAL of Receipts This Page (optional) Payroll deduction \$10.00 biweekly Payroll deduction \$10.00 biweekly	<u> </u>	C	20.00
Receipt For: Primary Other (specify) Aggregate Year-to-Date ▼ 210.00 SUBTOTAL of Receipts This Page (optional) 170.00			
Primary General Other (specify) SUBTOTAL of Receipts This Page (optional) 170.00			Payroli deduction \$10.00 biweekly
Other (specify) 210.00 SUBTOTAL of Receipts This Page (optional)	·	Aggregate Year-to-Date ▼	
SOBTOTAL of Receipts This Page (optional)			
	SUBTOTAL of Receipts This Page (optional)	·	170.00
TOTAL This Period (last page this line number only)	TOTAL This Period (last page this line numb	er only)	

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Any information copied from such Reports all or for commercial purposes, other than using	nd Statements may not be sold or used by any peg the name and address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) SURGICAL CARE AFFILIAT	ES POLITICAL ACTION COMMIT	TEE
Full Name of Individual (Last, First, Middle Lord Younts, Dana, , , Mailing Address 569 Brookwood Village	e Initial) or Full Organization Name	Date of Receipt
Suite 901	To	10 19 2016
City	State Zip Code AL 35209	Transaction ID : SA11AI.6092
Birmingham	AL 35209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Surgical Care Affiliates	HR Manager	Payroll deduction \$10.00 biweekly
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	210.00	
Full Name of Individual (Last, First, Middle 18. Lowder, Lindsay, , ,	e Initial) or Full Organization Name	Date of Receipt
Mailing Address 569 Brookwood Village		M M / D D / Y Y Y Y
Suite 901		10 19 2016
City	State Zip Code	Transaction ID : SA11AI.6093
Birmingham	AL 35209	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	[C]	38.00
Name of Employer (for Individual) Surgical Care Affiliates	Occupation (for Individual) Director	Memo Item Payroll deduction \$19.00 biweekly
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	345,00	
Full Name of Individual (Last, First, Middle	e Initial) or Full Organization Name	
Lowther, Kristine, , ,		Date of Receipt
Mailing Address 569 Brookwood Village		10 19 2016
Suite 901 City	State Zip Code	Transaction ID : SA11AI.6094
Birmingham	AL 35209	Amount of Each Receipt this Period
		Amount of Lacit neceipt this Feriod
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Surgical Care Affiliates	Vice President	Payroll deduction \$25.00 biweekly
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify)	525.00	
SUBTOTAL of Receipts This Page (optional	ıl) >	108.00
TOTAL This Period (last page this line num	nber only)	1 1 40 1 1 40 1 1 40

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or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and add	ress of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
SURGICAL CARE AFFILIAT	ES POLITICA	L ACTION COMMIT	TEE							
Full Name of Individual (Last, First, Middle Lucey, Michael, , ,		anization Name	Date of Receipt							
Mailing Address 5715 N Bay Ridge Avenue	9		10 19 2016							
City	State	Zip Code	Transaction ID : SA11AI.6095							
Whitefish Bay	WI	53217	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		40.00							
Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item							
Surgical Care Affiliates	Admini	istrator	Payroll deduction \$20.00 biweekly							
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 420.00								
Full Name of Individual (Last, First, Middle Mathis, Brian, , ,	e Initial) or Full Orga	anization Name	Date of Receipt							
Mailing Address 569 Brookwood Village Suite 901			10 19 2016							
City	State	Zip Code	Transaction ID : SA11AI.6096							
Birmingham	AL	35209	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.		50.00								
Name of Employer (for Individual) Surgical Care Affiliates		ation (for Individual) resident	Memo Item Payroll deduction \$25.00 biweekly							
Receipt For:	Aggregate Ye	ear-to-Date ▼								
Primary General Other (specify) ▼	4	525.00								
Full Name of Individual (Last, First, Middle C. McCall, Adrienne, , ,	e Initial) or Full Orga	anization Name	Date of Receipt							
Mailing Address 569 Brookwood Village Suite 901			10 19 2016							
City Birmingham	State AL	Zip Code 35209	Transaction ID : SA11AI.6098 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		20.00							
Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item							
Surgical Care Affiliates	Directo	r	Payroll deduction \$10.00 biweekly							
Receipt For: Primary General Other (specify)										
SUBTOTAL of Receipts This Page (optional		>	110.00							

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	he name and address of any political committee to	
NAME OF COMMITTEE (In Full) SURGICAL CARE AFFILIATE	S POLITICAL ACTION COMMITT	ΈΕ
Full Name of Individual (Last, First, Middle II McIntosh, Stephanie, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 569 Brookwood Village Suite 901		10 19 2016
City	State Zip Code	Transaction ID : SA11AI.6101
Birmingham	AL 35209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Surgical Care Affiliates	Administrator	Payroll deduction \$10.00 biweekly
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	210.00	
Full Name of Individual (Last, First, Middle II McLane-Onofrio, Dawn, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 569 Brookwood Village		10 19 2016
Suite 901 City	State Zip Code	
Birmingham	AL 35209	Transaction ID : SA11AI.6102 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer (for Individual) Surgical Care Affiliates	Occupation (for Individual) Dir. Integration Mgmt	Memo Item Payroll deduction \$10.00 biweekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
Full Name of Individual (Last, First, Middle In Meeks, Dare, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 569 Brookwood Village Suite 901		10 19 2016
City Birmingham	State Zip Code AL 35209	Transaction ID : SA11AI.6103
FEC ID number of contributing federal political committee.	C 33209	Amount of Each Receipt this Period 20.00
Name of Employer (for Individual) Surgical Care Affiliates	Occupation (for Individual) Administrator	Memo Item Payroll deduction \$10.00 biweekly
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	270.00	
SUBTOTAL of Receipts This Page (optional)		60.00
TOTAL This Period (last page this line number	er only)	

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	for commercial purposes, other than using the								
	NAME OF COMMITTEE (In Full) SURGICAL CARE AFFILIATES	POLI	TICA	L ACTION COMMITT	EE				
Α.	Full Name of Individual (Last, First, Middle Initial Melancon, Willis, P, ,	al) or Fu	ull Orga	anization Name	Date of Receipt				
	Mailing Address 569 Brookwood Village Suite 901	1			10 19 2016				
	City Birmingham	State)	Zip Code 35209	Transaction ID : SA11AI.6104				
	FEC ID number of contributing federal political committee.	С		33209	Amount of Each Receipt this Period 50.00				
	Name of Employer (for Individual) Surgical Care Affiliates			ation (for Individual) Director, Financial Operations	Memo Item Payroll deduction \$25.00 biweekly				
	Receipt For: Primary General Other (specify) ▼	Aggreg	gate Ye	ar-to-Date ▼ 425.00					
В.	Full Name of Individual (Last, First, Middle Initial Mills, Michelle, , ,	anization Name	Date of Receipt						
	Mailing Address 569 Brookwood Village Suite 901			I	10 19 2016				
	City Birmingham	State AL)	Zip Code 35209	Transaction ID : SA11Al.6105 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С			24.00				
	Name of Employer (for Individual) Surgical Care Affiliates			ation (for Individual) istrator	Memo Item Payroll deduction \$12.00 biweekly				
	Receipt For: Primary General Other (specify) ▼	Aggreg	gate Ye	ar-to-Date ▼ 204.00					
<u> </u>	Full Name of Individual (Last, First, Middle Initial Mondo, Gina, , ,	al) or Fu	ull Orga	anization Name	Date of Receipt				
	Mailing Address 569 Brookwood Village Suite 901 City	State		Zip Code	10 19 2016				
	Birmingham	AL	, 	35209	Transaction ID : SA11AI.6106 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С			20.00				
	Name of Employer (for Individual) Surgical Care Affiliates			ation (for Individual) r, New Business	Memo Item Payroll deduction \$10.00 biweekly				
	Receipt For: Primary General Other (specify)	Aggreg	gate Ye	ar-to-Date ▼ 210.00					
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	he name and address of any political committee t	
NAME OF COMMITTEE (In Full) SURGICAL CARE AFFILIATE	S POLITICAL ACTION COMMITT	EE
Full Name of Individual (Last, First, Middle I Morgan, Audra, E., ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 569 Brookwood Village Suite 901		10 19 2016
City	State Zip Code	Transaction ID : SA11AI.6107
Birmingham	AL 35209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Surgical Care Affiliates	Director	Payroll deduction \$10.00 biweekly
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	210.00	
Full Name of Individual (Last, First, Middle I Nelson, Thomas, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 569 Brookwood Village Suite 901		10 19 2016
City	State Zip Code	Transaction ID : SA11AI.6108
Birmingham	AL 35209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer (for Individual) Surgical Care Affiliates	Occupation (for Individual) Director	Memo Item Payroll deduction \$10.00 biweekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
Full Name of Individual (Last, First, Middle I Olson, Bryan, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 569 Brookwood Village Suite 901		10 19 2016
City	State Zip Code	Transaction ID : SA11AI.6111
Birmingham	AL 35209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) Surgical Care Affiliates	Occupation (for Individual) Director	Memo Item Payroll deduction \$25.00 biweekly
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	525.00	
SUBTOTAL of Receipts This Page (optional)	•	90.00
TOTAL This Period (last page this line number	er only)	

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NAME OF COMMITTEE (In Full) SURGICAL CARE AFFILIATES	S POLITICAL ACTION COMMITTE	ΞΕ
Full Name of Individual (Last, First, Middle In Pace, Louise, M, , Mailing Address 569 Brookwood Village Suite 901 City Birmingham FEC ID number of contributing federal political committee. Name of Employer (for Individual) Surgical Care Affiliates Receipt For: Primary General Other (specify)	State Zip Code AL 35209 C Occupation (for Individual) Administrator Aggregate Year-to-Date 420.00	Date of Receipt 10 19 2016 Transaction ID: SA11AI.6112 Amount of Each Receipt this Period 40.00 Memo Item Payroll deduction \$20.00 biweekly
Full Name of Individual (Last, First, Middle In Pitts, Candace, A., , Mailing Address 569 Brookwood Village Suite 901 City Birmingham FEC ID number of contributing federal political committee. Name of Employer (for Individual) Surgical Care Affiliates Receipt For: Primary General Other (specify) Guidelia In Individual (Last First Middle In Incident Incid	State Zip Code AL 35209 C Occupation (for Individual) Business Office Manager Aggregate Year-to-Date 210.00	Date of Receipt 10 19 2016 Transaction ID: SA11Al.6115 Amount of Each Receipt this Period 20.00 Memo Item Payroll deduction \$10.00 biweekly
Full Name of Individual (Last, First, Middle In Pocorobba, Jack, A., , Mailing Address 569 Brookwood Village Suite 901 City Birminghams FEC ID number of contributing federal political committee. Name of Employer (for Individual) Surgical Care Affiliates Receipt For: Primary General Other (specify)	State Zip Code AL 35209 C Occupation (for Individual) VP, Operations Aggregate Year-to-Date 210.00	Date of Receipt 10 19 2016 Transaction ID: SA11AI.6116 Amount of Each Receipt this Period 20.00 Memo Item Payroll deduction \$10.00 biweekly
SUBTOTAL of Receipts This Page (optional)	>	80.00
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NAME OF COMMITTEE (In Full) SURGICAL CARE AFFILIA	ATES POLITICAL ACTION COMMITT	ГЕЕ				
Full Name of Individual (Last, First, Mid Prince, Phillip, R., ,	, G	Date of Receipt				
Mailing Address 569 Brookwood Village Suite 901		10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City	State Zip Code	Transaction ID : SA11AI.6117				
Birmingham	AL 35209	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	40.00				
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
Surgical Care Affiliates	Director	Payroll deduction \$20.00 biweekly				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	420.00					
Full Name of Individual (Last, First, Mid B. Raskin, Leslie, J., ,	, G	Date of Receipt				
Mailing Address 569 Brookwood Village		10 19 2016				
Suite 901 City	State Zip Code	 				
Birmingham	AL 35209	Transaction ID : SA11AI.6118 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	ů –					
Name of Employer (for Individual) Surgical Care Affiliates	Occupation (for Individual) Director	Memo Item Payroll deduction \$15.00 biweekly				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00					
Full Name of Individual (Last, First, Mic. Roberts, Cory, P, ,	ddle Initial) or Full Organization Name	Date of Receipt				
Mailing Address 569 Brookwood Village Suite 901		10 19 2016				
City Birmingham	State Zip Code AL 35209	Transaction ID : SA11AI.6121				
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 76.92				
Name of Employer (for Individual) Surgical Care Affiliates	Occupation (for Individual) VP, Operations	Memo Item Payroll deduction \$38.46 biweekly				
Receipt For:		- ayron deduction \$50.40 biweekly				
Primary General Other (specify)	Aggregate Year-to-Date ▼ 807.66					
SUBTOTAL of Receipts This Page (option	onal)	146.92				
TOTAL This Period (last page this line n	umber only)	1 1 40 1 1 40 1 1 70 1				

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	for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) SURGICAL CARE AFFILIATES	POLITIC	CAL ACTION COMMITT	EE
Α.	Full Name of Individual (Last, First, Middle Initial Rosen, Andrew, $J.,$	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 569 Brookwood Village Suite 901			10 19 2016
	City	State AL	Zip Code	Transaction ID : SA11AI.6122
	Birmingham	AL	35209	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual)	Оссі	upation (for Individual)	Memo Item
	Surgical Care Affiliates	Vice	President	Payroll deduction \$25.00 biweekly
	Receipt For:	Aggregate	Year-to-Date ▼	-
	Primary General	riggrogato	Total to Bate .	
	Other (specify) ▼	L	525.00	
В.	Full Name of Individual (Last, First, Middle Initial Rucker, Michael, A., ,	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 569 Brookwood Village Suite 901			10 19 2016
	City	State	Zip Code	Transaction ID : SA11AI.6124
	Birmingham	AL	35209	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.38
	Name of Employer (for Individual) Surgical Care Affiliates		upation (for Individual) cutive Vice President	Memo Item Payroll deduction \$57.69 biweekly
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1211.49	
С .	Full Name of Individual (Last, First, Middle Initial Sharff, Richard, L., , Jr.	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 569 Brookwood Village Suite 901			10 19 2016
	City	State	Zip Code	Transaction ID : SA11AI.6126
	Birmingham	AL	35209	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
	Name of Employer (for Individual) Surgical Care Affiliates		upation (for Individual)	Memo Item Payroll deduction \$96.15 biweekly
	Receipt For:			
	Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		2019.15	
Н	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number o		<u> </u>	357.68

F	OR	LINE	PAGE	3	30	OF	35		
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	X	11a	11b		11c		12		
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	g the name and address of any political committee	
NAME OF COMMITTEE (In Full) SURGICAL CARE AFFILIAT	TES POLITICAL ACTION COMMITT	ΈΕ
Full Name of Individual (Last, First, Midd Shi, Diana, , ,	le Initial) or Full Organization Name	Date of Receipt
Mailing Address 569 Brookwood Village Suite 901		10 19 2016
City	State Zip Code	Transaction ID : SA11AI.6127
Birmingham	AL 35209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Surgical Care Affiliates	Director, Financial Operations	Payroll deduction \$15.00 biweekly
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	315.00	
Full Name of Individual (Last, First, Midd Sobel, Rikki, S., ,	lle Initial) or Full Organization Name	Date of Receipt
Mailing Address 569 Brookwood Village Suite 901		10 19 2016
City	State Zip Code	Transaction ID : SA11AI.6131
Birmingham	AL 35209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer (for Individual) Surgical Care Affiliates	Occupation (for Individual) Administrator	Memo Item Payroll deduction \$10.00 biweekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
Full Name of Individual (Last, First, Midd	le Initial) or Full Organization Name	Date of Receipt
Mailing Address 569 Brookwood Village Suite 901		10 19 2016
City Birmingham	State Zip Code AL 35209	Transaction ID : SA11AI.6132 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	30.00
Name of Employer (for Individual) Surgical Care Affiliates	Occupation (for Individual) Administrator	Memo Item Payroll deduction \$15.00 biweekly
Receipt For:	Aggregate Year-to-Date ▼	-
Primary General Other (specify)	315.00	
SUBTOTAL of Receipts This Page (options	al)	80.00
TOTAL This Period (last page this line num	nber only)	

		LINE	PAGE	3	31	OF	35			
(check only one)										
	X	11a		11b		11c		12		
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	sing the name and address of any political committee	
NAME OF COMMITTEE (In Full) SURGICAL CARE AFFILIA	ATES POLITICAL ACTION COMMITT	EE
Full Name of Individual (Last, First, Mid. Stack, Jeanette, , ,	ddle Initial) or Full Organization Name	Date of Receipt
Mailing Address 569 Brookwood Village Suite 901		10 19 2016
City	State Zip Code	Transaction ID : SA11AI.6133
Birmingham	AL 35209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Surgical Care Affiliates	Administrator	Payroll deduction \$15.00 biweekly
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	315.00	
Full Name of Individual (Last, First, Mid 3. Stephanie, Carla, F., ,	,	Date of Receipt
Mailing Address 569 Brookwood Village Suite 901		10 19 2016
City	State Zip Code	Transaction ID : SA11AI.6134
Birmingham	AL 35209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	30.00	
Name of Employer (for Individual) Surgical Care Affiliates	Occupation (for Individual) Director	Memo Item Payroll deduction \$15.00 biweekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	
Full Name of Individual (Last, First, Mid. Stewart, Matt, L., ,	ddle Initial) or Full Organization Name	Date of Receipt
Mailing Address 569 Brookwood Village Suite 901		10 19 2016
City Birmingham	State Zip Code AL 35209	Transaction ID : SA11AI.6135
	33203	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Surgical Care Affiliates	Senior Director	Payroll deduction \$10.00 biweekly
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	210.00	
SUBTOTAL of Receipts This Page (option	onal)	80.00
TOTAL This Period (last page this line n	umber only)	

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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by e name and address of any political cor	any person for the purpose of soliciting contributions mmittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) SURGICAL CARE AFFILIATES	S POLITICAL ACTION COM	MMITTEE
Full Name of Individual (Last, First, Middle Ir Strauss, Jason, J., , Mailing Address 569 Brookwood Village	itial) or Full Organization Name	Date of Receipt
Suite 901		10 19 2016
City	State Zip Code	Transaction ID : SA11AI.6137
Birmingham	AL 35209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	160.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Surgical Care Affiliates	Group Vice President	Payroll deduction \$80.00 biweekly
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1680.0	00
Full Name of Individual (Last, First, Middle Ir Szott, Timothy, D., ,	itial) or Full Organization Name	Date of Receipt
Mailing Address 569 Brookwood Village Suite 901	Territoria	10 19 2016
City Birmingham	State Zip Code AL 35209	Transaction ID : SA11Al.6138 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer (for Individual) Surgical Care Affiliates	Occupation (for Individual) Administrator	Memo Item Payroll deduction \$10.00 biweekly
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.0	00
Full Name of Individual (Last, First, Middle Ir	itial) or Full Organization Name	Date of Receipt
Mailing Address 569 Brookwood Village Suite 901		10 19 2016
City Birmingham	State Zip Code AL 35209	Transaction ID : SA11AI.6144
	33203	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Surgical Care Affiliate	Vice President, Finance	Payroll deduction \$19.00 biweekly
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	399.0	00
SUBTOTAL of Receipts This Page (optional)		218.00
TOTAL This Period (last page this line number	only)	

		LINE	PAGE	3	33	OF	35		
(c	he	ck only							
	X	11a	11b		11c		12		
		13	14		15		16		17

or for commercial purposes, other than using	the name and address of any political committee					
NAME OF COMMITTEE (In Full) SURGICAL CARE AFFILIATE	ES POLITICAL ACTION COMMIT	TEE				
Full Name of Individual (Last, First, Middle Waite, Kristi, , ,	Date of Receipt					
Mailing Address 569 Brookwood Village Suite 901	10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City	State Zip Code	Transaction ID : SA11AI.6146				
Birmingham	AL 35209	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	20.00				
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
Surgical Care Affiliates	Director	Payroll deduction \$10.00 biweekly				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	210.00					
Full Name of Individual (Last, First, Middle Weaver, Kristi, , ,	Date of Receipt					
Mailing Address 569 Brookwood Village Suite 901						
City	State Zip Code	Transaction ID : SA11AI.6147				
Birmingham	AL 35209	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	40.00					
Name of Employer (for Individual) Surgical Care Affiliates	Occupation (for Individual) Regional VP	Memo Item Payroll deduction \$20.00 biweekly				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00					
Full Name of Individual (Last, First, Middle Wells, Coy, R., ,	Initial) or Full Organization Name	Date of Receipt				
Mailing Address 569 Brookwood Village Suite 901	10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City	State Zip Code	Transaction ID : SA11AI.6148				
Birmingham	AL 35209	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	ů					
Name of Employer (for Individual)	Memo Item					
Surgical Care Affiliates	VP, Operations	Payroll deduction \$15.00 biweekly				
Receipt For:	Aggregate rear-to-bate *					
Primary General Other (specify)	315.00					
SUBTOTAL of Receipts This Page (optional).		90.00				
TOTAL This Period (last page this line numb	er only)					

FOR LINE NUMBER:			PAGE	3	34	OF	35			
(check only one)										
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		13		14		15		16		17

or for commercial purposes, other than using	the name and address of any political committee					
NAME OF COMMITTEE (IN FUII) SURGICAL CARE AFFILIAT	ES POLITICAL ACTION COMMITT	ГЕЕ				
Full Name of Individual (Last, First, Middle White, Victoria, F., ,	Date of Receipt					
Mailing Address 569 Brookwood Village Suite 901	•					
City	State Zip Code	Transaction ID : SA11AI.6149				
Birmingham	AL 35209	_ Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	20.00				
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
Surgical Care Affiliates	Director, Managed Care	Payroll deduction \$10.00 biweekly				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	210.00					
Full Name of Individual (Last, First, Middle Yuckman, Timothy, W., ,	Date of Receipt					
Mailing Address 569 Brookwood Village Suite 901						
City	State Zip Code	Transaction ID : SA11AI.6155				
Birmingham	AL 35209	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	20.00					
Name of Employer (for Individual) Surgical Care Affiliates	Occupation (for Individual) Director, Operations	Memo Item Payroll deduction \$10.00 biweekly				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00					
Full Name of Individual (Last, First, Middle Zahn, Albert, J., ,	e Initial) or Full Organization Name	Date of Receipt				
Mailing Address 569 Brookwood Village Suite 901	10 19 2016					
City Birmingham	State Zip Code 35209	Transaction ID : SA11AI.6156 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	20.00				
Name of Employer (for Individual) Surgical Care Affiliates	Occupation (for Individual) Vice President	Memo Item Payroll deduction \$10.00 biweekly				
Receipt For:	Aggregate Year-to-Date ▼	1				
Primary General Other (specify)	210.00					
SUBTOTAL of Receipts This Page (optional)	60.00				
TOTAL This Period (last page this line num	her only)	4190.20				

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SCHEDULE B (FEC Form 3X)	FOR LI			NE NUMBER: PAGE 35 OF 35					
ITEMIZED DISBURSEMENTS	Use separate schedule(s)		(check only one)						
	for each category of the Detailed Summary Page		21b	22 X 23 26 27 28b 28c 29 30b					
[<u> </u>		28a						
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan									
NAME OF COMMITTEE (In Full)									
$ \; angle$ SURGICAL CARE AFFILIATES PO	COMMITTE	E							
Full Name (Last, First, Middle Initial)			İ						
A. FRIENDS OF PATRICK MURPHY				Date of Disbursement					
Mailing Address 4521 PGA BLVD #412	10 06 2016								
City	State Zip Code			FEC Identification Number					
PALM BEACH GARDENS	FL	33418							
Purpose of Disbursement Contribution			011	C C00493825					
Candidate Name				Transaction ID : SB23.6018					
MURPHY, PATRICK E, , ,			Category/ Type	Amount of Each Disbursement this Period					
	ment For: 20			2500.00					
Senate President	Primary Other (speci	General		Memo Item					
State: FL District: 00	Other (speci	iy) ▼							
Full Name (Last, First, Middle Initial)									
B.				Date of Disbursement					
Mailing Address				M M / D D / Y Y Y Y					
Mailing Address									
City	State Zip Code			FEC Identification Number					
Purpose of Disbursement									
Candidate Name Category/				Amount of Each Disbursement this Period					
Office Sought: House Disbursement For: Senate Primary General Other (specify)				4 4					
				Mome Item					
State: District:		Memo Item							
Full Name (Last, First, Middle Initial) C.	Data of Dishara was at								
o .		Date of Disbursement							
Mailing Address									
City	State	Zip Code		FEC Identification Number					
Purpose of Disbursement									
i alpose of Disbulsement	· · ·	C							
Candidate Name	Amount of Each Disbursement this Period								
		Category/ Type	2.23.7.2.5.2.3.7.7.7.7.7.7.7.7.7.7.7.7.7.7.7.7.7.7						
Office Sought: House Disburser Senate	ement For:			7 7					
Senate Primary General President Other (specify) ▼				□ M					
State: District:		Memo Item							
				2500.00					
SUBTOTAL of Disbursements This Page (optional)			·····•	2500.00					
TOTAL This Period (last page this line number only))			2500.00					